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## BIB DATA SHEET

CONFIRMATION NO. 8222

<b>SERIAL NUMBER</b> 10/666,154	<b>FILING or 371(c) DATE</b> 09/19/2003 <b>RULE</b>	<b>CLASS</b> 206	<b>GROUP ART UNIT</b> 3728	<b>ATTORNEY DOCKET NO.</b> DDI5016USANP		
<b>APPLICANTS</b> Bryan Windus-Smith, Scotland, UNITED KINGDOM; John Allen, Mendota Heights, MN; /S.R./ <b>** CONTINUING DATA *****</b> NONE /S.R./ <b>** FOREIGN APPLICATIONS *****</b> NONE /S.R./ <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/13/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /STEVEN ALAN REYNOLDS/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWINGS</b> 28	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> PHILIP S. JOHNSON JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933-7003 UNITED STATES						
<b>TITLE</b> Medical device package, kit and associated methods						
<b>FILING FEE RECEIVED</b> 834	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		